

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751367

FILED
Mar 09, 2007
Secretary of State

Entity Name: SOCIETY FOR THE PRESERVATION OF VAUDEVILLE AND VARIETY ARTS INC.

Current Principal Place of Business:

1506 DESOTO AVENUE
TAMPA, FL 33606 US

New Principal Place of Business:

Current Mailing Address:

1506 S. DESOTO AVENUE
TAMPA, FL 33606 US

New Mailing Address:

FEI Number: 59-1997432

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FENDA, PATRICIA
4201 W. NORTH B
TAMPA, FL 33609 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CVD () Delete
Name: LIPPE, STEWART
Address: 1506 S. DE SOTO
City-St-Zip: TAMPA, FL

Title: CPD () Delete
Name: HENNESSEY, JANE
Address: 1713 SO. HUBERT
City-St-Zip: TAMPA,, FL 33629

Title: CTD () Delete
Name: WHITE, TOM
Address: 512 CYPRESS LANE
City-St-Zip: LUTZ, FL 33549

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEWART LIPPE

CVD

03/09/2007

Electronic Signature of Signing Officer or Director

Date